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COLOMBIA.

*Report from Bocas del Toro—Fruit port.*BOCAS DEL TORO, COLOMBIA, *July 21, 1900.*

SIR: I have the honor to submit report for the week ended July 21. The following vessels have been inspected and cleared: July 18, steamship *Brookline*, List; crew, 32; no passengers; Baltimore; 1 officer's family. Steamship *Douglas*, Eriksen; crew, 24; passengers, 15; pieces of baggage, 21; Mobile; 1 officer's wife and child. July 21, steamship *Simon Dumois*, Nieunegaar; crew, 15; passenger, 1; pieces of baggage, 2; Mobile. Steamship *Veratas*, Rasmussen; crew, 18; no passengers; Philadelphia.

The health of the port and vicinity continues favorable. One death has been reported to me during the week, 1 male negro, stricture of the urethra.

Respectfully,

HERMAN B. MOHR,

Acting Assistant Surgeon, U. S. M. H. S.

The SURGEON-GENERAL,

*U. S. Marine-Hospital Service.**Confirming reports of yellow fever at Bocas del Toro.*BOCAS DEL TORO, COLOMBIA, *July 25, 1900.*

SIR: I have the honor to confirm my cablegram, via Limon, of July 24, "Two cases of yellow fever; 1 death, necropsy, confirms diagnosis," and herewith submit report on these cases:

The first patient was Geo. Bielg, German, bookkeeper, resident here since April 5. The history of this case is a peculiar one; Bielg, who had been having slight attacks of fever ever since his arrival here, was seized with a chill on July 8, followed by fever, and was seen by Dr. Osterhout, a reliable local practitioner, who treated him for malarial fever. The fever subsided, and on Monday the 9th he returned to his work. On Wednesday, the 11th, he had another chill and fever, but was out again on Thursday and attended to his duties until Wednesday the 18th, when Dr. Osterhout was again called to see him, and the same treatment as before adopted. Nausea setting in, the patient refused all medication, but owing to the previous history no suspicions were aroused. At this time Dr. Osterhout's wife was seized with a chill, temperature reaching 39.40° C. She was treated by the doctor himself, and was seen by Dr. Jumel, who saw nothing suspicious at that time in her case.

On July 22, Dr. Osterhout requested Dr. Jumel to assume charge of Bielg's case, as he could not leave his wife, her condition not having improved. After observing the case carefully all day, Dr. Jumel's suspicions were aroused, but owing to the previous history and the absence of clinical data, he concluded to await developments. The patient had refused all medication; his temperature was 39.4° C, pulse, 80; he was nauseated, slightly jaundiced, urine doubtful, as attendant did not collect it, somewhat prostrated. The following morning the temperature fell to 38.9° C., pulse rose to 92, urine had been passed, but was not saved by attendant. Later in the day some black vomit was ejected, icterus deepened, temperature fell to 38.1° C., pulse rose to 104 and weaker; no more urine was passed, but patient had a tar-like stool. As I was not able to go and see the case, Dr. Jumel kept me informed,